



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 3603

|                             |                           |              |                        |                                  |
|-----------------------------|---------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>10/757,271 | FILING DATE<br>01/15/2004 | CLASS<br>005 | GROUP ART UNIT<br>3673 | ATTORNEY<br>DOCKET NO.<br>011204 |
|                             | RULE                      |              |                        |                                  |

## APPLICANTS

Robert L. Falwell, Raytown, MO;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 07/06/2004

| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY | SHEETS | TOTAL<br>CLAIMS | INDEPENDENT<br>CLAIMS |
|---------------------------------|---|---------------------|--------|-----------------|-----------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance | MO                  | 5      | 20              | 2                     |
| Verified and<br>Acknowledged    | Examiner's Signature<br>Initials  |                     |        |                 |                       |

## ADDRESS

Christopher J. Whewell  
 Western Patent Group  
 6020 Tonkowa Trail  
 Georgetown , TX  
 78628

## TITLE

Adjustable support device

|                               |   |   |
|-------------------------------|---|---|
| FILING FEE<br>RECEIVED<br>385 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-------------------------------|---|---|